

The Dave Steakley Dream Fund Gift and Pledge Form

Name _____
Address _____
City _____ State _____ Zip _____
Phone (Day) _____ Phone (Eve) _____
Email _____

Yes! I would like to support the Dave Steakley Dream Fund with a gift commitment in the amount of
\$ _____

Pledge Schedule Options:

Multi-year pledges may be paid out over a four year period.

- One-time gift Semiannual payments beginning on _____
 Annual payments beginning on _____ Quarterly payments beginning on _____

Payment Options:

My employer _____ will match my gift!

- Check enclosed (*payable to ZACH Theatre*)
 Visa MasterCard American Express Discover

Name on Card _____
Card Number _____ Exp. Date _____ (mm/yy) CVV _____
Authorized Signature _____ Date _____

For gifts of stock or alternative payment options, please contact Charlie Frasier, Chief Development Officer, at cfrasier@zachtheatre.org or 512-476-0594 x294.

Additional Details Concerning Your Donation:

- I would like to be listed in ZACH's program and on ZACH's Leadership Wall as _____

Program listings begin at contributions of \$2,500 and Leadership Wall recognition at contributions of \$10,000.

- I choose to make my gift anonymously
 I would like to request the following naming opportunity _____
 I would like to make a donation toward ZACH's 2015-16 Annual Fund in the amount of \$ _____

Signature _____ Date _____

Thank you for your generous support of ZACH Theatre!

ZACH Theatre is a 501(c)(3) nonprofit organization EIN# 74-1369410



1510 Toomey Road, Austin, TX 78704 • Phone 512-476-0594 • Fax 512-476-0314
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